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APPLICANTS

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** CONTINUING DATA None MC

** FOREIGN APPLICATIONS None MC

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 212	INDEPENDENT CLAIMS 11
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ADDRESS

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STATELINE, NV
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TITLE

Low-capacitance input/output and electrostatic discharge circuit for protecting an integrated circuit from electrostatic discharge

FILING FEE RECEIVED 1606	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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